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Elasomeran/teprotumumab

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Thyroid-eye disease flare, diarrhoea and muscle spasms: case report

A 51-year-old woman developed loose stools and muscle spasms during treatment with tepronumab during treatment with thyroid eye disease (TED). She also developed thyroid eye disease (TEN) flare following administration of elasomeran for COVID-19 vaccination [routes not stated; not all dosages and duration of reaction onsets not stated].

The woman presented for evaluation of worsening protrusion and irritation of the right eye for the past year. She had a history of Graves' disease and a distant history of smoking. She was diagnosed with TED over a decade before the presentation and had undergone right orbital floor and medial wall decompression. Her condition partially improved after treatment with methylprednisolone and prednisone. However, she experienced recurrence of symptoms after some time. She was diagnosed with reactivation of TED. After which, she started receiving prednisone with tapered doses. One week into this taper, and two months after her last dose of steroids, she started receiving an eight-cycle treatment of teprotumumab infusions at three-week intervals. Her clinical condition continued to improve after completion of teprotumumab treatment. During teprotumumab infusions, she experienced loose stools approximately three times per week, and in the last two months of treatment, she experienced muscle spasms in her lower extremities, which were tolerable and mild adverse effects of teprotumumab.

The woman received magnesium and potassium supplementation for treatment-related adverse effects, which led to improvement. At 30 weeks after two weeks after her second dose of elasomeran [mRNA-1273; manufactured by Moderna], she experienced another flare of her TED. At that time, she was put prednisone which temporised; however, did not resolve the flare. She was offered a second round of teprotumumab infusions versus further decompression surgery, and she opted to undergo bilateral lateral and medial orbital wall decompressions. At 13 months of teprotumumab, and two months after her surgeries, she showed signs of improvement.

Cheng OT, et al. Teprotumumab in advanced reactivated thyroid eye disease. American Journal of Ophthalmology Case Reports 26: 101484, Jun 2022. Available from: URL: http://www.journals.elsevier.com/american-journal-of-ophthalmology-case-reports